

**NC DHHS
DMH/DD/SAS
CAP-MR/DD Crisis Services**

	Description	Conditional Endorsement					Full Endorsement				
CAP-MR/DD – Crisis Services		Evidence of Compliance	MET	NOT MET	N/A		Evidence of Compliance	MET	NOT MET	N/A	Comments
	Provider Requirements										
a	**1) Must be delivered by practitioners employed by an organization that meets the standards established by the Division of MHDDSAS or LME approved/endorsed by DHHS. These standards set for the administrative, financial, clinical, quality improvement, and information services infrastructure necessary to provider services.	Provider application with all required supporting documentation as required;					Provider application with all required supporting documentation as required;				
b	2) Provider organization must demonstrate they meet these standards by being endorsed by the LME.	provider application; program description Policy and					Provider application; program description Policy and				
c	** The organization must be established as a legally recognized entity in N.C.	Procedure Manual					Procedure Manual				

	Staffing Requirements										
a	Worker qualifications must meet requirements for paraprofessionals in 10A NCAC Staff must meet the requirements for paraprofessionals in 10A NCAC 27G.0200.	Program description; Personnel Manual; job descriptions					Personnel files; supervision plans or other documentation that staff minimum requirements and supervision requirements are met.				
b	Client specific competencies as identified by the individual's person-centered planning team and documented in the plan of care.	Program description; Personnel Manual; job descriptions.					Personnel files; supervision plans or other documentation that staff minimum requirements and supervision requirements are met; documentation that client specific training has been provided as identified in the Plan of Care; copy of approved Plan of Care.				
c	Direct care staff must have a criminal record check.	Program description; Personnel Manual; job descriptions					Personnel files; supervision plans or other documentation that staff minimum requirements and supervision requirements are met; copy of criminal record check.				

d	A healthcare registry check is required as required in accordance with 10A NCAC 27G.0200	Program description; Personnel Manual; job descriptions					Personnel files; supervision plans or other documentation that staff minimum requirements and supervision requirements are met; copy of healthcare registry check.				
e	A driving record must be checked if staff is providing transportation.	Program description; Personnel Manual; job descriptions					Personnel files; supervision plans or other documentation that staff minimum requirements and supervision requirements are met; copy of driving record check.				
Services Type/ Setting											
a	Crisis Services is provided in the setting the recipient normally receives services.	Program description; policies and procedures.					Program description; policies and procedures; service notes documenting implementation of appropriate programming. Copy of approved Plan of Care.				
Program/Clinical Requirements											
b	Provision of one additional staff person for the supervision for the CAP-MR/DD waiver recipient, as needed during an acute crisis situation in which the recipient is presenting episodes of unmanageable or inappropriate behavior that require staff with specialized training.	Program description; policies and procedures.					Program description; policies and procedures; service notes documenting implementation of appropriate programming; documentation that additional training specific to the				

							needs of the consumer has been provided as identified in the Plan of Care. Copy of approved Plan of Care.				
c	The service is provided so that the recipient can continue to participate in his/her daily routine and/or residential setting with interruption.	Program description; policies and procedures.					Program description; policies and procedures; service notes documenting implementation of appropriate programming; documentation that additional training specific to the needs of the consumer has been provided as identified in the Plan of Care. Copy of approved Plan of Care.				
d	Crisis services are provided so that imminent institutional placement is prevented while preventing the individual from harming themselves or others.	Program description; policies and procedures.					Program description; policies and procedures; service notes documenting implementation of appropriate programming; documentation that additional training specific to the needs of the consumer has been provided as identified in the Plan of Care. Copy of approved Plan of Care.				
e	Crisis services may be provided	Program					Program				

	for periods up to 14 days per episode.	description; policies and procedures.					description; policies and procedures; service notes documenting implementation of appropriate programming; copy of approved Plan of Care.				
f	Following any use of crisis services the recipient's Plan of Care will be reviewed and updated to reflect a plan for prevention, and intervention of subsequent occurrences.	Program description; policies and procedures.					Program description; policies and procedures; service notes documenting implementation of appropriate programming; copy of approved Plan of Care and crisis plan.				
g	The initial order for the service may be approved by the case manager with approval or denial of the service within 3 days of the service inception.	Program description; policies and procedures.					Program description; policies and procedures; copy of service order.				
	Documentation Requirements										
a	Service notes shall include: full date service provided, duration of service; purpose of the contact as it relates to a goal; description of the intervention/activity; assessment of consumer's progress; appropriate signatures as identified in Service Records Manual.	Service Record; Policy and Procedure Manual					Evidence of documentation according to Service Records Manual.				